

APPLICATION FOR SIGN PERMIT
TOWN OF KINGSBURY

DATE: _____

PERMIT #: _____

APPLICANT NAME: _____

PHONE: _____

ADDRESS: _____

OWNER NAME: _____

PHONE: _____

ADDRESS: _____

PROPERTY LOCATION: _____

TAX MAP NUMBER: _____

ZONE DISTRICT: _____

CONTRACTOR: _____

SIGN DIMENSIONS: _____

HEIGHT FROM GRADE: _____

MATERIALS: _____

ILLUMINATED: _____

SETBACK FROM ROAD: _____

FEE: \$50.00

ATTACH DRAWING.

IN CONSIDERATION OF THE GRANTING OF THE PERMIT REQUESTED, THE APPLICANT AGREES TO COMPLY WITH ALL APPLICABLE PROVISIONS OF THE CODE OF THE TOWN OF KINGSBURY, AND THE NEW YORK STATE UNIFORM FIRE PREVENTION AND BUILDING CODE.

DATE: _____

APPLICANT SIGNATURE: _____

APPROVED: _____

EXPIRES: _____

PLAN REVIEWED BY: _____

CO ISSUED: _____